



REQUEST FOR REVOCATION



Of Permit Authorization Under NJPDES General Permit No.:

NJ0088315 (Stormwater General Basic Industrial Permit);
NJ0108456 (Concrete Products Manufacturing Permit);
NJ0107671 (Scrap Metal Processing/Auto Recycling Permit); or
NJ0134791 (Newark Airport Complex Permit)

Please complete this form if you believe that your facility's authorization under one of the general permits (please check) listed above should be revoked. Complete, sign and date this form before submitting, along with any desired supporting documentation, to the address listed on the revocation checklist.

1. Facility Information:

NJPDES No. : NJ Program Interest No. (PI) _____
Name: _____
Street Address: _____

County: _____
Contact Person: _____ Tele: (_____) _____
Mailing Address: _____

2. Reason why Authorization should be revoked (please check box before letter):

- A. All the stormwater from this site is discharged to a combined sewer (one that carries sanitary wastewater and stormwater to a municipal treatment plant). If so, the Combined Sewer Certification on the back of this form must be completed, signed and dated, or other supporting documentation submitted.
- B. The facility has an existing NJPDES permit for all of its discharges of stormwater.
NJPDES No. NJ _____ NJ _____
- C. The building housing all of the regulated industrial activity extends all the way to the property line on all sides. There is no loading dock, and there is no industrial activity occurring on the roof.
- D. All industrial activity has ceased and no "Significant Material" remains exposed to stormwater.
- E. Other: (** Attach a printed or typed explanation**)

ANY REASON PROVIDED MAY BE SUBJECT TO VERIFICATION BY DEPARTMENT SITE INSPECTION

3. Signatory Information:

This form can only be signed by one of the following persons: vice president or higher in a corporation; general partner in a partnership; sole proprietor; executive officer or ranking elected official in a government or public agency, or by anyone designated to have signatory authority for one of the previously named persons. Written verification of this designation must be attached.

*****Please COMPLETE No. 4 Certification Section BEFORE mailing*****

**Storm Water
General Permit
Revoke
11/02**

4. Certification:

"I certify under penalty of law that I have personally examined and am familiar with the information submitted in this Request For Revocation and all attached documents, and that this Request For Revocation and all attached documents were prepared by personnel under my direction or supervision in accordance with a system designed to assure that qualified personnel properly gather and evaluate the information submitted. Based on my inquiry of those individuals immediately responsible for obtaining the information, I believe that the information is true, accurate and complete."

"I am aware that pursuant to the Water Pollution Control Act N.J.S.A. 58:10A-1 et seq., there are significant civil and criminal penalties for making a false statement, representation or certification in any application, record, or other document filed or required to be maintained under the Act, including fines and/or imprisonment."

(Signature)

(Date)

(Print Name)

(Title)

5. Certification of Discharge to a Combined Sewer (if applicable)

For facilities which are located within an area served by a combined sewer, the following certification must be completed by a representative from a municipal sewer or public works department, sewerage agency, or municipal engineer.

Facility Name: _____

Address: _____

Block No. _____ **Lot No.** _____

(Signature)

(Date)

(Print Name)

(Title)

(Name of certifying agency)

**If a signed Combined Sewer Certification can not be obtained, other supporting documentation may be submitted for Department review in lieu of the above Combined Sewer Certification*.*

COMPLETE AND SUBMIT THE ORIGINAL APPLICATION TO:

New Jersey Department of Environmental Protection
Division of Water Quality
Bureau of Permit Management
Attn: Administrative Review Unit
P.O. Box 029
Trenton, New Jersey 08625-0029